

## DMV Lane Technician Observation Report

DMV Technician: <u>MIKE PIECUSKI</u>		Position: <u>1</u> or <u>2</u>	
Station: <u>DOVER</u>	Date: <u>11-3-14</u>	Time: <u>2:11</u>	
Vehicle Make: <u>FORD</u>	Model: <u>THUNDERBIRD</u>	Year: <u>1995</u>	
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>271934</u>	
Auditor: <u>DOSSERT</u>	Covert / <u>Overt</u> (circle one)		

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	✓		
2. Was <b>Emissions</b> testing required?		✓	
a) Was Emissions testing performed using OBD?			✓
b) Was Emissions testing performed using Analyzer Probe?			✓
c) Was Emissions testing performed using Paddle(s)?			✓
d) Was Emissions testing performed using Clip?			✓
3. Was <b>Catalytic Converter</b> inspection required?		✓	
a) Was Catalytic Converter inspection performed?			✓
* 4. Was <b>Fuel Tank</b> pressure testing required?	✓		
a) Was Fuel Tank pressure testing performed?		✓	
5. Was <b>Fuel Cap</b> pressure testing required?	✓		
a) Was Fuel Cap pressure testing performed?	✓		
6. Is this test a <b>Re-check</b> from a prior failure?		✓	
a) Which re-check test is being performed? 1 2 3 (circle one)			✓
b) If this is re-check #3, was repair paperwork verified for waiver?			✓
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?		✓	
a) Was Two-Speed Idle testing performed?			✓
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?		✓	
a) Was Curb Idle testing performed?			✓
<b>Comment:</b> <u>* Unable To Access Line @ Canister To Perform Test *</u>			
Lane Supervisor Signature: _____			

## DMV Lane Technician Observation Report

DMV Technician: <u>MARK JILKINS</u>		Position: <u>1</u> or 2	
Station: <u>DOVER</u>	Date: <u>11-3-14</u>	Time: <u>1:58</u>	
Vehicle Make: <u>Chev</u>	Model: <u>Silverado</u>	Year: <u>2005</u>	
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>VN91657</u>	
Auditor: <u>DOSSERT</u>		Covert/ <u>Overt</u> (circle one)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?		<input checked="" type="checkbox"/>	
b) Was Emissions testing performed using Analyzer Probe?			<input checked="" type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?			<input checked="" type="checkbox"/>
a) Was Two-Speed Idle testing performed?			<input checked="" type="checkbox"/>
<b>Sussex County Only</b>			
8. Was Curb Idle testing required?			<input checked="" type="checkbox"/>
a) Was Curb Idle testing performed?			<input checked="" type="checkbox"/>
<b>Comment:</b>			
Lane Supervisor Signature: _____			

Revised 04/12/2013



## DMV Lane Technician Observation Report

DMV Technician: <u>Ted Kiserz</u>		Position: <u>1</u> or 2	
Station: <u>Dover</u>	Date: <u>11-3-14</u>	Time: <u>2:17</u>	
Vehicle Make: <u>Hynd</u>	Model: <u>ELANTRA</u>	Year: <u>2006</u>	
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>548270</u>	
Auditor: <u>Dossert</u>		Covert / <u>Overt</u> (circle one)	
	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<u>✓</u>		
2. Was <b>Emissions</b> testing required?	<u>✓</u>		
a) Was Emissions testing performed using OBD?	<u>✓</u>		
b) Was Emissions testing performed using Analyzer Probe?		<u>✓</u>	
c) Was Emissions testing performed using Paddle(s)?		<u>✓</u>	
d) Was Emissions testing performed using Clip?		<u>✓</u>	
3. Was <b>Catalytic Converter</b> inspection required?		<u>✓</u>	
a) Was Catalytic Converter inspection performed?			<u>✓</u>
4. Was <b>Fuel Tank</b> pressure testing required?		<u>✓</u>	
a) Was Fuel Tank pressure testing performed?			<u>✓</u>
5. Was <b>Fuel Cap</b> pressure testing required?		<u>✓</u>	
a) Was Fuel Cap pressure testing performed?			<u>✓</u>
6. Is this test a <b>Re-check</b> from a prior failure?		<u>✓</u>	
a) Which re-check test is being performed? 1 2 3 (circle one)			<u>1</u>
b) If this is re-check #3, was repair paperwork verified for waiver?			<u>✓</u>
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?		<u>✓</u>	
a) Was Two-Speed Idle testing performed?			<u>✓</u>
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?		<u>✓</u>	
a) Was Curb Idle testing performed?			<u>✓</u>
<b>Comment:</b>			
Lane Supervisor Signature: _____			

## DMV Lane Technician Observation Report

DMV Technician: <u>Francis Riccio</u>		Position: <u>1 or 2</u> <u>Reck</u>	
Station: <u>Dover</u>	Date: <u>11-3-14</u>	Time: <u>2:21</u>	
Vehicle Make: <u>Olds</u>	Model: <u>Aurora</u>	Year: <u>1997</u>	
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>U982996</u>	
Auditor: <u>Dossert</u>		Covert / <u>Overt</u> (circle one)	

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	✓		
2. Was <b>Emissions</b> testing required?	✓		
a) Was Emissions testing performed using OBD?	✓		
b) Was Emissions testing performed using Analyzer Probe?		✓	
c) Was Emissions testing performed using Paddle(s)?		✓	
d) Was Emissions testing performed using Clip?		✓	
3. Was <b>Catalytic Converter</b> inspection required?		✓	
a) Was Catalytic Converter inspection performed?			✓
4. Was <b>Fuel Tank</b> pressure testing required?		✓	
a) Was Fuel Tank pressure testing performed?			✓
5. Was <b>Fuel Cap</b> pressure testing required?		✓	
a) Was Fuel Cap pressure testing performed?			✓
* 6. Is this test a <b>Re-check</b> from a prior failure?	✓		
a) Which re-check test is being performed? 1 <u>(2)</u> 3 (circle one)	✓		
b) If this is re-check #3, was repair paperwork verified for waiver?			✓
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?		✓	
a) Was Two-Speed Idle testing performed?			✓
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?		✓	
a) Was Curb Idle testing performed?			✓
<b>Comment:</b>			
* Recheck #2 *			
Lane Supervisor Signature: _____			